

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	319	1-9-97
TYPIST	319	1-9-97
VERIFIER	319	1-9-97
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

# INDEX OF CLAIMS

Claim	Final	Original	Date
1	✓	✓	7/11
2	✓	✓	12/2
3	✓	✓	5/21
4	✓	✓	5/5
5	✓	✓	8/27
6	✓	✓	3/26
7	✓	✓	9/10
8	✓	✓	2/25
9	✓	✓	02
10	✓	✓	02
11	✓	✓	02
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Claim	Final	Original	Date
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## SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected